

CITY OF HOUSTON DEED RESTRICTION COMPLAINT FORM

ABOUT THE VIOLATION

Date:	Council District:		
Type of violation/activity:	Business	Setback	Other
Address of violation:			Zip:
Violator and/or Property C	wner's Name:		
Description of Violation/Ac	ctivity:		
	AROU	T THE SUBDIVIS	ION
	ADOU	T THE SUBSTITE	1011
Subdivision:			Section:
Name of civic club/homeow	ner's association:		
-	ABOUT THE	CONTACT PERSO	ON/ENTITY
Name of Contact Person:_			Phone Number:
Address:			Z ip:
		NOTE	
person/entity to keep us info	rmed of the status	of the alleged violat	tion and witnesses. We rely on contact ion(s). Please attach available photographs ation. Please sign below. Thank you.
		Signati	ure of Contact Person/Representative

MAIL TO:

City of Houston Legal Department Neighborhood Protection Division Deed Restriction Enforcement Team

P.O. Box 1562

Houston, Texas 77251-1562